

7852 Walker Drive, Suite 200 Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi @jsitel.com

June 26, 2017

VIA Electronic Comment Filing System

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC Docket No. 14-58

2017 ETC Annual Report of Mid-Maine Telecom LLC

Study Area Code 103315

Dear Ms. Dortch:

On behalf of Mid-Maine Telecom LLC ("Company"), JSI files the attached FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.¹

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall JSI Vice President 301-459-7590

jkuykendall@jsitel.com

FCC Foi	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	103315	
<015>	Study Area Name	MID MAINE TELECOM	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Megan Harvey	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2019929050 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	megan.harvey@ottcommunications.com	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

Data Coll	ection Form									2013	-0986/OIVIB CONTROLIN	0. 3060-0819
<010>	Study Area Co	ode				103315						
<015>	Study Area Na						ET EGOM					
<020>	Program Year					MID MAINE T	ELECOM					
			2 ab a l al a a a a a									
<030>				t regarding this		Megan Harve						
<035>				rson identified		302						
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	in data line <0	30> megan.harve	y@ottcommunication	ns.com				
<210>	For the prior	r calendar yea	ar, were there	e any reportal	ole voice serv	ice outages?	No					
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
	NORS									Did This Outage		
	Reference	_	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures

•	fulfilled Service Request lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control N July 2013	lo. 3060-0819
<010>	Study Area Code		103315		
<015>	Study Area Name		MID MAINE TELECOM		
<020>	Program Year		2018		
<030>	Contact Name - Person USAC should contact reg	garding this data	Megan Harvey		
<035>	Contact Telephone Number - Number of person	n identified in data line <030>	2019929050 ext.		,
<039>	Contact Email Address - Email Address of person	n identified in data line <030>	megan.harvey@ottcommunications.com		
<300> U	Infulfilled service request (voice)		0		
<310> [Detail on attempts (voice)				
		Nam	e of Attached Document		
<320>	Unfulfilled service request (broadband)		9		
		103315me330.pdf			
<330>	Detail on attempts (broadband)				
			Jame of Attached Document		

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	103315	
<015>	Study Area Name	MID MAINE TELECOM	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should conta	ct regarding this data Megan Harvey	
<035>	Contact Telephone Number - Number of p <030>	erson identified in data line 2019929050 ext	
<039>	Contact Email Address - Email Address of p <030>	erson identified in data line megan.harvey@	ottcommunications.com
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or of	telephony service in the prior Offered you are designated an ETC for	only fixed voice
<410>	Complaints per 1000 customers for fixed v	pice 2.0	
<420>	Complaints per 1000 customers for mobile	voice	
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or greathe prior calendar year for each service are an ETC for any facilities you own, operate,	eter) for broadband service in Offered a in which you are designated	only fixed broadband
<440>	Complaints per 1000 customers for fixed b	roadband 0.0	
<450>	Complaints per 1000 customers for mobile	broadband	

, ,	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	103315	
<015>	Study Area Name	MID MAINE TELECOM	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com	
<500>	Certify compliance with applicable service quality standards and consumer pro	otection rules Yes	
		103315me510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

(600) Functionality in Emergency Situations	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	103315
<015>	Study Area Name	MID MAINE TELECOM
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	103315me610.pdf

(700) Price Offerings including Voice Rate Data Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
<010> Study Area Code	103315	
<015> Study Area Name	MID MAINE TELECOM	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Megan Harvey	
<035> Contact Telephone Number - Number of person identified in data	line <030> 2019929050 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> megan.harvey@ottcommunications.com	
<701> Residential Local Service Charge Effective Date 1/1/2017 702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
-	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
-									
_									
-									
•									
-									
-									
•					2				
-					See at	tached worksheet			
-									
-									
-									
•									
-									
•									
-									
-									
<u>_</u>									

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	03315
<015>	Study Area Name	MID MAINE TELECOM
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				 See attack worksheet - 	hed				
				, romanos					

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		103315
<015>	Study Area Name		MID MAINE TELECOM
<020>	Program Year		2018
<030>	Contact Name - Person U	JSAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	2019929050 ext.
<039>	Contact Email Address - I	Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com
<810>	Reporting Carrier	Mid-Maine Telecom LLC	
<811>	Holding Company	Otelco Inc.	
<812>	Operating Company	Mid-Maine Telecom LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	See att	ched workshe	et

(900) Tribal Lands Reporting	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013
	103315
<010> Study Area Code	MID MAINE TELECOM
<015> Study Area Name <020> Program Year	2018
<020> Program Year <030> Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035> Contact Name - reison OSAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com
<900> Does the filing entity offer tribal land services? (Y/N)	No
<910> Tribal Land(s) on which ETC Serves	
<920> Tribal Government Engagement Obligation	Name of Attached Document
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	Select Yes or No or Not Applicable
<921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. <922> Feasibility and sustainability planning; <923> Marketing services in a culturally sensitive manner; <924> Compliance with Rights of way processes <925> Compliance with Land Use permitting requirements <926> Compliance with Facilities Siting rules <927> Compliance with Environmental Review processes <928> Compliance with Cultural Preservation review processes <929> Compliance with Tribal Business and Licensing requirements.	

	oice and Broadband Service Rate Comparability lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		103315	
<015>	Study Area Name		MID MAINE TELECOM	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Megan Harvey	
<035>	Contact Telephone Number - Number of person identified in data line <	030>	2019929050 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <	<030>	megan.harvey@ottcommunications.com	
<1000>	Voice services rate comparability certification	Yes		
<1010>	Attach detailed description for voice services rate comparability compliance			
			Name of Attached Docume	nt
<1020>	Broadband comparability certification		- Pricing is no more than th Wireline Competition Bureau	e most recent applicable benchmark announced by
<1030>	Attach detailed description for broadband comparability compliance			
			Name of Attached Docume	ent

(1100) No Terrestrial Backhaul Reporting Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> <015>	Study Area Code Study Area Name	103315	
<020>	Program Year	MID MAINE TELECOM 2018	
<030> <035>	Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	Megan Harvey 2019929050 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications	.com
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te	rms and Condition for Lifeline Customers	FCC Form 481
Lifeline		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Coll	ection Form	July 2013
•		
<010>	Study Area Code	103315
<015>	Study Area Name	MID MAINE TELECOM
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <0302	megan.harvey@ottcommunications.com
	1	103315me1210.pdf
		105715MC12101pd1
41210	Towns 0 Conditions of Voice Telephone Lifeline Dlane	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
	•	Name of Attached Document
<1220>	Link to Public Website	
\1220 >	Link to Public Website HTTP	
	-	
"Please ch	neck these boxes below to confirm that the attached document(s), on line 1210,	
	bsite listed, on line 1220, contains the required information pursuant to	
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must	
annually r	. , , ,	
armaany r	сроге.	
<1221>	Information describing the terms and conditions of any voice	
	telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
	2 ctails on the manifest of finitees provided as part of the plant,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

Data Coll	ice Cap Carrier Additional Documentation lection Form Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	103315	
<015>	Study Area Name	MID MAINE TELECOM	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4		
<2023>	Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

Data Collection Fo	Carrier Additional Documentation orm Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}			
<2017A>	Connect America Fund Phase II recipient?			
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.			
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information		
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)			

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	103315
<015>	Study Area Name	MID MAINE TELECOM
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
			Yes - At	tach Certifica	cation
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}				103315me3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Doo Information	cument Lis	ting Required	
(3012A)	Community Anchor Institutions {47 CFR §	Yes - Attach New Comm	munity An	ıchors	J
(3012B)	54.313(f)(1)(ii)} Please Provide Attachment	Name of Attached Doo	cument Lis	sting Required	103315me3012.xlsm
(3013)	Is your company a Privately Held ROR Carrier {47 CFR	Information (Yes/No)	0	\odot	
(3014)	§ 54.313(f)(2)} If yes, does your company file the RUS annual report	(Yes/No)	\circ	\circ	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)				
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		L		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Doo Information	cument Lis	ting Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	(Yes/No)	0		
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:				
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers				
(3023)	Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows				
(3026)	Attach the worksheet listing required information	Name of Attached Doo Information	cument Lis	ting Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<015> Study Area Name	<010>	Study Area Code	103315
Colate Chame - Person USAC should contact regarding this data Megan Harvey Colstact Telephone Number - Number of person identified in data line <030> Megan Harvey 2019929050 ext.	<015>	Study Area Name	MID MAINE TELECOM
<035> Contact Telephone Number - Number of person identified in data line <030> 2019929050 ext.	<020>	Program Year	2018
Conditional Telephone Number of person nectanged in data line 3000	<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<039> Contact Email Address - Email Address of person identified in data line <030> megan.harvev@ottcommunications.com	<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.
	<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

Financial Data Summary	
·	
(3027) Revenue	
(3028) Operating Expenses	
()	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	
(3034) Dividerius	

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	103315
<015>	Study Area Name	MID MAINE TELECOM
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
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<039>	Contact Email Address - Email Address of person identified in data l	ine <030> megan.harvey@ottcommunications.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information

Name of Attached Document Listing Required Information

Name of Attached Document Listing Required Information

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	103315
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<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Study Area Code of Reporting Carrier: Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	103315
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<020>	Program Year	2018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) <u>John Staurulakis</u> , <u>Inc.</u> also certify that I am an officer of the reporting carrier; my respond agent; and, to the best of my knowledge, the reports and data p	is authorized to submit the information reported on behalf of the reporting carrier. It is include ensuring the accuracy of the annual data reporting requirements provided to the authorized rovided to the authorized agent is accurate.
Name of Authorized Agent: John Staurulakis, Inc.	
Name of Reporting Carrier: MID MAINE TELECOM	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/23/2017
Printed name of Authorized Officer: Dennis Andrews	
Title or position of Authorized Officer: Senior Vice Presiden	t
Telephone number of Authorized Officer: 2565861420 ext.	
Study Area Code of Reporting Carrier: 103315	Filing Due Date for this form: 07/03/2017
, ,	nished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment der Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipies	ents on Behalf of Reporting Carrier
as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support in data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the informati	
ame of Reporting Carrier: MID MAINE TELECOM	· · · · · · · · · · · · · · · · · · ·
ame of Authorized Agent Firm: John Staurulakis, Inc.	
ignature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 06/23/2017
ame of Authorized Agent Employee: John Staurulakis, Inc.	
itle or position of Authorized Agent or Employee of Agent Staff Consultant	
elephone number of Authorized Agent or Employee of Agent: 3014597590 ext.	
tudy Area Code of Reporting Carrier: 103315 Filing Due Date for this form: 07/03/2	/2017



		DESCRIPTION OF SERVICE	SERVICE REQUESTED (√ ALL APPLICABLE			DESCRIBE HOW CARRIER ATTEMPTED TO
REF	CUSTOMER NAME	REQUESTED	TO UNFULFILLED REQUEST)		BROADBAND	PROVIDE SERVICE
			BROADBAND	VOICE	SPEED REQUESTED	
						This location is 21,500 feet from CO. DSL is
						not available and there are no competitive
1	Customer 1	Customer requested 4MB	٧		4	service option available.
						This location is 18,500 feet from CO. DSL is
						not available and there are no competitive
2	Customer 2	Customer requested 6MB	٧		6	service options available.
						This location is 25,000 feet from CO. DSL is
_						not available and there are no competitive
3	Customer 3	Customer requested 6MB	√		6	service options available.
						This location is 19,542 feet from the remote.
		Customer requested				DSL is not available and there are no
4	Customer 4	10MB	٧		10	competitive service options available.
-	customer 4	TOWID	v		10	competitive service options available.
						This location is 22,317 feet from the remote.
						DSL is not available and there are no
5	Customer 5	Customer requested 6MB	٧		6	competitve service options available.
						·
						1MB was the best effort available at this
6	Customer 6	Customer requested 6MB	V		6	location. Customer installed offering.
		Customer requested				1MB was the best effort available at this
7	Customer 7	10MB	٧		10	location.
						1MB was the best effort available at this
						location. Customer remains with this
8	Customer 8	Customer requested 6MB	٧		6	service.
						Customer is approximately 20,356 feet from
					_	the remote. 1MB is all that is availableand
9	Customer 9	Customer requested 6MB	٧		6	customer did not reinstall.

Mid-Maine Telecom LLC Line 510

Service Quality Standards and Consumer Protection Rules

The company complies with applicable service quality standards and consumer protections, including, without limitation: (1) compiling monthly trouble report data and submitting the data on a quarterly basis to the Maine Public Utilities Commission; (2) reporting major service interruptions to the MPUC in a manner consistent with its orders and rules; (3) maintaining local service tariffs and rate schedules on file, giving notice of changes to such rate schedules pursuant to MPUC rules, and making rate and service information available for public inspection at the company's offices and on its website; (4) clearly listing all charges and credits on customers' bills; (5) providing full and prompt investigation of, and response to, customer complaints in accordance with dispute resolution procedures established by the MPUC; (6) providing access to enhanced 911; (7) participating in a statewide system to assist the hearing impaired and providing service discounts for the deaf, hard of hearing, blind and visually impaired; (8) complying with federal CPNI rules and other applicable consumer privacy protection requirements, including training of employees that have access to CPNI on the rules and procedures for protecting account information and authenticating callers; and (9) implementing procedures that are consistent with the FTC's guidance on measures to detect/prevent identity theft (Red Flag).

In addition, the company adheres to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service, and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3. The Company furthermore will comply with all requirements set forth in the 2015 Open Internet Order when it becomes effective.

Mid-Maine Telecom LLC Line 610

Functionality in Emergency Situations

The company certifies it is able to function in emergency situations. The company has a combination of permanently placed generators at its central office(s), business office(s), 24 x 7 Network Operations Center, and other mission critical locations, plus numerous portable generators for use at remote switching sites. In addition to onsite technicians, all systems are accessible via our remotely located 24 x 7 staffed Network Operations Center, with on-call technicians available 24 hours a day. Poles, cables, central office, remote, and miscellaneous plant equipment are kept at various sites and are available for emergency repairs. Technicians and Operations Management staff carry company-provided cells phones which are used on a daily basis and to maintain a communication link in the event of a major outage on our network or during emergency situations. The company complies with the FCC's backup power requirements, effective October 16, 2015.

(700) Price Offerings including Voice Rate Data	FC
Data Collection Form	ON
	Link

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	103315
<015>	Study Area Name	MID MAINE TELECOM
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

<701> Residential Local Service Charge Effective Date 1/1/2017
<702> Single State-wide Residential Local Service Charge

<703>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
, uir	1027	1437	1017	Residential Local	1037	1017	Mandatory Extended Area	107
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
ME	Plymouth		FR	19.07	0.0	0.4	0.0	19.47
ME	Plymouth		FR	19.29	0.0	0.41	0.0	19.7
ME	Alton		FR	18.19	0.0	0.38	0.0	18.57
ME	Alton		FR	19.29	0.0	0.41	0.0	19.7
ME	West Enfield		FR	18.25	0.0	0.38	0.0	18.63
ME	West Enfield		FR	19.29	0.0	0.41	0.0	19.7
ME	Old Town Rural		FR	19.29	0.0	0.41	0.0	19.7
ME	Levant		FR	17.96	0.0	0.38	0.0	18.34
ME	Levant		FR	19.29	0.0	0.41	0.0	19.7

(710)	Broadband Price	Offerin
Data	Collection Form	

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	103315
<015>	Study Area Name	MID MAINE TELECOM
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2019929050 ext.

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	<d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	ME	ALL	29.95	0.0	29.95	5.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	39.95	0.0	39.95	10.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	49.95	0.0	49.95	25.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	59.95	0.0	59.95	40.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	34.95	0.0	34.95	5.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	44.95	0.0	44.95	10.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	54.95	0.0	54.95	25.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	64.95	0.0	64.95	40.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	11.4	0.0	11.4	5.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	20.4	0.0	20.4	10.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	29.08	0.0	29.08	25.0	1.0	999999.0	Other, No limit on usage allowance.
	ME	ALL	39.78	0.0	39.78	40.0	1.0	999999.0	Other, No limit on usage allowance.

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		103315
<015>	Study Area Name		MID MAINE TELECOM
<020>	Program Year		2018
<030>	Contact Name - Person US	AC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number	er - Number of person identified in data line <030>	2019929050 ext.
<039>	Contact Email Address - En	nail Address of person identified in data line <030>	megan.harvey@ottcommunications.com
<810>	Reporting Carrier	Mid-Maine Telecom LLC	
<811>	Holding Company	Otelco Inc.	
<812>	Operating Company	Mid-Maine Telecom LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	Mid-Maine Telplus LLC		OTT Communications
			_

Mid-Maine Telecom LLC Line 1210

Terms and Conditions for Lifeline Customers

Mid-Maine Telecom LLC's terms and conditions of voice telephony plans (local and toll) offered to lifeline customers can be found at the following websites:

http://www.ottops.com/wp-content/uploads/2015/02/polr-tariff-mmt2.pdf

https://www.ottcommunications.com/pdfs/MMT TERMS CONDITIONS 9 1 2016.pdf

Mid-Maine Telecom LLC (SAC 103315)

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Mid-Maine Telecom LLC hereby certifies that throughout 2017, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time. If a request for broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream is unreasonable, the Company offers broadband service at the highest available speed.

Kids Peace N.E. 129 Military Road ME 4418